

APPLICATION FOR RENTAL



Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APARTMENT	RENT	START DATE	AGENT/REFERRED BY
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APPLICANT INFORMATION

FIRST NAME	LAST NAME	M.I.	SSN	DRIVER'S LICENSE #
BIRTH DATE	Phone ()	EMAIL		

CURRENT ADDRESS

STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE ()	
MONTHLY RENT \$	REASON FOR LEAVING			

PREVIOUS ADDRESS

STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE ()	
MONTHLY RENT \$	REASON FOR LEAVING			

PROPOSED OCCUPANTS

LIST NAMES AND BIRTH DATES OF ALL ADDITIONAL OCCUPANTS 18 YEARS OR OLDER

Name:	Birth Date:
Name:	Birth Date:
Name:	Birth Date:

LIST NAMES AND BIRTH DATES OF ALL OCCUPANTS 18 YEARS OR YOUNGER

Name:	Birth Date:
Name:	Birth Date:

PETS

PETS? <input type="checkbox"/> Yes <input type="checkbox"/> No	DESCRIBE
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EMPLOYMENT & INCOME INFORMATION

1. OCCUPATION	EMPLOYER	MONTHLY SALARY	
SUPERVISOR NAME	SUPERVISOR PHONE	START DATE	END DATE
2. OCCUPATION	EMPLOYER	MONTHLY SALARY	
SUPERVISOR NAME	SUPERVISOR PHONE	START DATE	END DATE

EMERGENCY CONTACT

1. NAME	ADDRESS	PHONE ()	RELATIONSHIP
2. NAME	ADDRESS	PHONE	RELATIONSHIP

| | () | |

PERSONAL REFERENCES

1. NAME	ADDRESS	PHONE ()	RELATIONSHIP
1. NAME	ADDRESS	PHONE ()	RELATIONSHIP

BACKGROUND INFORMATION

Has applicant ever been sued for bill	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever been locked out of their apartment by the sheriff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever been bankrupt?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever been brought to court by another landlord?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever been guilty of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever moved owing rent or damaged an apartment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever broken a Lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the total move-in amount available now (rent and deposit)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

VEHICLE INFORMATION

1. MAKE & MODEL	YEAR	LICENSE NO. & STATE
2. MAKE & MODEL	YEAR	LICENSE NO. & STATE

OTHER VEHICLES

OTHER INFORMATION

HOW DID YOU HEAR ABOUT THIS PROPERTY?

PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUATE THIS APPLICATION

Applicant authorizes landlord to contact past and present landlords, employers, credit bureaus, neighbors and other source deemed necessary to investigate applicant.

All information is true, accurate and complete to the best of my applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OF FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THE FORM AT ANY TIME.

X _____ X _____
 APPLICANT SIGNATURE DATE

If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person

NOTES:

